

EXHIBIT C

DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE

7/12/2022

UNIFORM COMMERCIAL CODE SECTION
PO BOX 303
TRENTON, NJ 08646

PAGE 001

SEARCH CERTIFICATE # 50276009
SEARCH CRITERIA: ASSUNCAO BROS

** DEBTOR ** 6969146

ASSUNCAO BROS., INC.
29 WOOD AVENUE
EDISON, NJ 08820

Secured Party: WELLS FARGO VENDOR FINANCIAL SERVICES, LLC
PO BOX 35701
BILLINGS, MT 59107

Filing Number: 54539341

Filing Date: 07/22/2020

Maturity Date: 07/22/2025

Filing History: 07/22/2020 UCC1

** DEBTOR ** 7056413

ASSUNCAO BROS., INC.
29 WOOD AVENUE
EDISON, NJ 08820

Secured Party: WELLS FARGO EQUIPMENT FINANCE, INC.
600 SOUTH 4TH STREET, MAC N9300-100
MINNEAPOLIS, MN 55415

Filing Number: 54896521

Filing Date: 11/16/2020

Maturity Date: 11/16/2025

Filing History: 11/16/2020 UCC1

** DEBTOR ** 7144612

ASSUNCAO BROS., INC.
29 WOOD AVE.
EDISON, NJ 08820

Secured Party: KOMATSU FINANCIAL LIMITED PARTNERSHIP
8770 W BRYN MAWR AVE SUITE 100
CHICAGO, IL 60631

Filing Number: 55131216

Filing Date: 04/01/2021

Maturity Date: 04/01/2026

Filing History: 04/01/2021 UCC1

** DEBTOR ** 6900936

ASSUNCAO BROS., INC.
29 WOOD AVE
EDISON, NJ 08820

Secured Party: KUBOTA CREDIT CORPORATION, U.S.A.
PO BOX 2046
GRAPEVINE, TX 76099

Filing Number: 54064522

DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE

7/12/2022 UNIFORM COMMERCIAL CODE SECTION
PO BOX 303
TRENTON, NJ 08646

PAGE 002

SEARCH CERTIFICATE # 50276009
SEARCH CRITERIA: ASSUNCAO BROS

Filing Date: 05/30/2020
Maturity Date: 05/30/2025
Filing History: 05/30/2020 UCC1

** DEBTOR ** 6291053
ASSUNCAO BROS., INC.
29 WOOD AVE
EDISON, NJ 08820

Secured Party: JOHN DEERE CONSTRUCTION & FORESTRY COMPANY
6400 NW 86TH ST
JOHNSTON, IA 50131
Filing Number: 52538971
Filing Date: 12/07/2017
Maturity Date: 12/07/2022
Filing History: 12/07/2017 UCC1
12/01/2020 UCC3 Termination

** DEBTOR ** 5687501
ASSUNCAO BROS., INC.
29 WOOD AVENUE
EDISON, NJ 08820

Secured Party: MANASQUAN BANK
2221 LANDMARK PLACE
MANASQUAN, NJ 08736
Filing Number: 51297541
Filing Date: 08/25/2015
Maturity Date: 08/25/2025
Filing History: 08/25/2015 UCC1
07/21/2020 UCC3 Continuation

** DEBTOR ** 6891058
ASSUNCAO BROS., INC.
29 WOOD AVENUE
EDISON, NJ 08820

Secured Party: WELLS FARGO VENDOR FINANCIAL SERVICES, LLC
PO BOX 35701
BILLINGS, MT 59107
Filing Number: 54009943
Filing Date: 05/18/2020
Maturity Date: 05/18/2025
Filing History: 05/18/2020 UCC1

** DEBTOR ** 7255921

DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE

7/12/2022

UNIFORM COMMERCIAL CODE SECTION
PO BOX 303
TRENTON, NJ 08646

PAGE 003

SEARCH CERTIFICATE # 50276009
SEARCH CRITERIA: ASSUNCAO BROS

ASSUNCAO BROS., INC.
29 WOOD AVE.
EDISON, NJ 08820

Secured Party: KOMATSU FINANCIAL LIMITED PARTNERSHIP
8770 W BRYN MAWR AVE SUITE 100
CHICAGO, IL 60631
Filing Number: 55356701
Filing Date: 08/02/2021
Maturity Date: 08/02/2026
Filing History: 08/02/2021 UCC1

** DEBTOR ** 7178436
ASSUNCAO BROS. INC.
29 WOOD AVE
EDISON, NJ 08820

Secured Party: U.S. SMALL BUSINESS ADMINISTRATION
2 NORTH 20TH STREET, SUITE 320
BIRMINGHAM, AL 35203
Filing Number: 55218535
Filing Date: 05/17/2021
Maturity Date: 05/17/2026
Filing History: 05/17/2021 UCC1

** DEBTOR ** 7144620
ASSUNCAO BROS., INC.
29 WOOD AVE
EDISON, NJ 08820

Secured Party: VFS US LLC
P.O. BOX 26131
GREENSBORO, NC 27402
Filing Number: 55131230
Filing Date: 04/01/2021
Maturity Date: 04/01/2026
Filing History: 04/01/2021 UCC1

** DEBTOR ** 6541953
ASSUNCAO BROS., INC.
29 WOOD AVE
EDISON, NJ 08820

Secured Party: JOHN DEERE CONSTRUCTION & FORESTRY COMPANY
6400 NW 86TH ST
JOHNSTON, IA 50131
Filing Number: 53186331
Filing Date: 01/15/2019
Maturity Date: 01/15/2024

DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE

7/12/2022

UNIFORM COMMERCIAL CODE SECTION
PO BOX 303
TRENTON, NJ 08646

PAGE 004

SEARCH CERTIFICATE # 50276009
SEARCH CRITERIA: ASSUNCAO BROS

Filing History: 01/15/2019 UCC1
03/22/2022 UCC3 Termination

** DEBTOR ** 6502863
ASSUNCAO BROS., INC.
29 WOOD AVE
EDISON, NJ 08820

Secured Party: JOHN DEERE CONSTRUCTION & FORESTRY COMPANY
6400 NW 86TH ST
JOHNSTON, IA 50131

Filing Number: 53083164

Filing Date: 11/07/2018

Maturity Date: 11/07/2023

Filing History: 11/07/2018 UCC1
12/11/2018 UCC3 Amendment
08/28/2020 UCC3 Termination

THE UNDERSIGNED FILING OFFICER HEREBY CERTIFIES THAT THE ABOVE LISTING IS A RECORD OF ALL PRESENTLY EFFECTIVE FINANCING STATEMENTS WHICH NAME THE ABOVE DEBTOR AND WHICH ARE ON FILE IN MY OFFICE AS OF 7/12/2022. THIS CERTIFICATE ISSUED ON 7/14/2022 1:21:26 PM.




Elizabeth Maher Muoio
State Treasurer

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|---|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | |
| CSC | 8008585294 |
| B. E-MAIL CONTACT AT FILER (optional) | |
| NJSOSUCCFilingsV3@cscglobal.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| <input checked="" type="checkbox"/> CSC 801 Adlai Stevenson Drive Springfield, IL 62703 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 54539341

07/22/20 14:00:04

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|----------------------|
| 1a. ORGANIZATION'S NAME | | | | |
| ASSUNCAO BROS., INC. | | | | |
| OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | |
| 1c. MAILING ADDRESS | 29 Wood Avenue | CITY EDISON | STATE NJ | POSTAL CODE 08820 |
| | | | | COUNTRY US |
| 2a. ORGANIZATION'S NAME | | | | |
| OR | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | |
| 2c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE |
| | | | | COUNTRY |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | | |
|--|--------------------------|---------------------|-------------------------------|----------------------|
| 3a. ORGANIZATION'S NAME | | | | |
| Wells Fargo Vendor Financial Services, LLC | | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | |
| 3c. MAILING ADDRESS | PO Box 35701 | CITY Billings | STATE MT | POSTAL CODE 59107 |
| | | | | COUNTRY US |

4. COLLATERAL: This financing statement covers the following collateral.

This Financing Statement covers the equipment and other assets described below and/or on any annex, schedule and/or exhibit hereto (which is to be considered an integral part hereof), plus all existing and future replacements, exchanges and substitutions therefor, attachments, accessories, accessions and additions thereto, and insurance, lease, sublease and other proceeds thereof. Equipment: 1 Kobelco Excavator Hydraulic, Serial# LF09010001, Model# SK85CS7 1 Kent Hammer Hydraulic, Serial# 08696, Model# F9FSP. The Collateral covered by this UCC-1 Financing Statement is within the scope of Chapter 9 of Title 12A of New Jersey Statutes.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box: Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailee Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
450-0018868-001 1934 46263

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|---|---------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | 8008585294 |
| CSC | |
| B. E-MAIL CONTACT AT FILER (optional) | NJSOSUCCFilingsV3@cscglobal.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| <p>CSC 801 Adlai Stevenson Drive Springfield, IL 62703 US</p> | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 54896521

11/16/20 12:16:07

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|--|---------------------|-------------------------------|----------------------|---------------|
| 1a. ORGANIZATION'S NAME ASSUNCAO BROS., INC. | | | | |
| OR | | | | |
| 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 1c. MAILING ADDRESS 29 Wood Avenue | CITY EDISON | STATE NJ | POSTAL CODE 08820 | COUNTRY US |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|--------------------------|---------------------|-------------------------------|-------------|---------|
| 2a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

| | | | | |
|---|---------------------|-------------------------------|----------------------|---------------|
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) | | | | |
| 3a. ORGANIZATION'S NAME Wells Fargo Equipment Finance, Inc. | | | | |
| OR | | | | |
| 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 3c. MAILING ADDRESS 600 South 4th Street, MAC N9300-100 | CITY Minneapolis | STATE MN | POSTAL CODE 55415 | COUNTRY US |

4. COLLATERAL: This financing statement covers the following collateral:
One (1) Dynapac Model CC1300 Asphalt Roller S/N 10000334V0A009592 together with all accessories, attachments, parts, repairs, additions, and replacements attached thereto or incorporated therein and in the proceeds thereof. Collateral covered by this financing statement is within the scope of Chapter 9 ("Secured Transactions") of the Uniform Commercial Code as adopted in New Jersey as of the date of filing this financing statement, pursuant to New Jersey Statutes 12A:9-102 and 12A:9-109.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

6b. Check only if applicable and check only one box:

Lessee/Lessor Consignee/Consignor Seller/Buyer Degee/Balior Licensee/Licensor

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

001-0001787-000 2018 85909

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|---|-----------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | 8003313282 |
| Lien Solutions | |
| B. E-MAIL CONTACT AT FILER (optional) | uccfilingreturn@wolterskluwer.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 US | |

State of New Jersey
 Department of the Treasury
 Division of Revenue & Enterprise Services
 UCC Section
 Filed

Filing Number: 55131216

04/01/21 19:47:17

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | | | |
|--|----|--------------------------|---------------------|-------------------------------|----------------------|---------------|
| 1a. ORGANIZATION'S NAME ASSUNCAO BROS., INC. | OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 2c. MAILING ADDRESS 29 WOOD AVE. | | | CITY EDISON | STATE NJ | POSTAL CODE 08220 | COUNTRY US |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | | | |
|-------------------------|----|--------------------------|---------------------|-------------------------------|-------------|---------|
| 2a. ORGANIZATION'S NAME | OR | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 2c. MAILING ADDRESS | | | CITY | STATE | POSTAL CODE | COUNTRY |

| | | | | | | |
|---|----|--------------------------|---------------------|-------------------------------|----------------------|---------------|
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) | | | | | | |
| 3a. ORGANIZATION'S NAME Komatsu Financial Limited Partnership | OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 3c. MAILING ADDRESS 8770 W Bryn Mawr Ave Suite 100 | | | CITY Chicago | STATE IL | POSTAL CODE 60631 | COUNTRY US |

4. COLLATERAL: This financing statement covers the following collateral:
 ONE (1) KOMATSU PC138USLC-11 Hydraulic Excavator, S/N# 59033, INCLUDES 36" HDP BUCKET, SET BUCKET PINS FOR COUPLER, MPLR4 HYDRAULIC COUPLER W/ PINS AND KIT, PREMIER 48 MONTH / 5,000 HOUR WARRANTY. Which collateral is within the scope of Title 12A, Chapter 9 of the New Jersey Statutes. COMPLETE WITH ALL PRESENT ATTACHMENTS, ACCESSORIES, REPLACEMENT PARTS, ADDITIONS AND ALL PROCEEDS THEREOF.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailee Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
79761252

UCC FINANCING STATEMENT**FOLLOW INSTRUCTIONS**

| | |
|---|-----------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | 8003313282 |
| Lien Solutions | |
| B. E-MAIL CONTACT AT FILER (optional) | uccfilingreturn@wolterskluwer.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| <input checked="" type="checkbox"/> Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 US | |

State of New Jersey
 Department of the Treasury
 Division of Revenue & Enterprise Services
 UCC Section
 Filed

Filing Number 54064522

05/30/20 6:21:20

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|
| 1a. ORGANIZATION'S NAME | | | |
| OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| | ASSUNCAO | MARTIN | SUFFIX |
| 1c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |
| 7 HAZELWOOD CT | WARREN | NJ | 07059 |
| COUNTRY US | | | |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|
| 2a. ORGANIZATION'S NAME | | | |
| OR | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| | ASSUNCAO BROS., INC. | | SUFFIX |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |
| 29 WOOD AVE | EDISON | NJ | 08820 |
| COUNTRY US | | | |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | |
|-------------------------|-----------------------------------|---------------------|-------------------------------|
| 3a. ORGANIZATION'S NAME | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| | Kubota Credit Corporation, U.S.A. | | SUFFIX |
| 3c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |
| PO Box 2046 | Grapevine | TX | 76099 |
| COUNTRY US | | | |

4. COLLATERAL: This financing statement covers the following collateral:
 KUBOTA SVL95-2SHFC KBC2063CPL1B50411 *SVL95-2SHFC,

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
 75270263

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|--|--|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | |
| JOHN DEERE FINANCIAL 8884278713 | |
| B. E-MAIL CONTACT AT FILER (optional) JDFuccfilings@johndeere.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 52538971

12/07/17 9:33:17

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|--|--|-----------------------------------|-------------------------------|---------------|
| 1a. ORGANIZATION'S NAME | | | | |
| OR | 1b. INDIVIDUAL'S SURNAME ASSUNCAO | FIRST PERSONAL NAME MARTIN | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 1c. MAILING ADDRESS 7 HAZELWOOD CT | CITY WARREN | STATE NJ | POSTAL CODE 07059 | COUNTRY US |
| 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here <input type="checkbox"/> and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) | | | | |
| 2a. ORGANIZATION'S NAME ASSUNCAO BROS., INC. | | | | |
| OR | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 2c. MAILING ADDRESS 29 WOOD AVE | CITY EDISON | STATE NJ | POSTAL CODE 08820 | COUNTRY US |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | | |
|---|--------------------------|---------------------|-------------------------------|---------------|
| 3a. ORGANIZATION'S NAME JOHN DEERE CONSTRUCTION & FORESTRY COMPANY | | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 3c. MAILING ADDRESS 6400 NW 86TH ST | CITY JOHNSTON | STATE IA | POSTAL CODE 50131 | COUNTRY US |

4. COLLATERAL: This financing statement covers the following collateral:

John Deere 410L Wheel Loader Backhoe S/N: 286564 TRM Manufacturing, Inc. 125 Bucket S/N: D310SK together with (1) all attachments, accessories and components, repairs and improvements, (2) all accounts, general intangibles, contract rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without limitation, insurance, sale, lease and rental proceeds, and proceeds of proceeds. All collateral covered by the financing statement falls within the scope of Article 9 of the UCC, pursuant to 12A:9-102 and 12A:9-109.

5. Check only if applicable and check only one box: Collateral is held in a Trust; (see UCC1Ad, item 17 and instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box Check only if applicable and check only one box:

Public-Finance Transaction Manufactured Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
3557728

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

9a. ORGANIZATION'S NAME

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

OR
9b. INDIVIDUAL'S SURNAME
ASSUNCAO

Filing Number: 52538971

FIRST PERSONAL NAME
MARTIN

12/07/17 9:33:17

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR
10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME OR ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR
11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral)

13. This FINANCING STATEMENT is to be filed [or record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS:

The filer attests that the Collateral set forth in this Financing Statement is within the scope of the New Jersey Uniform Commercial Code-Secured Transactions pursuant to N.J.S.A. 12A:9-102 and N.J.S.A. 12A:9-109, as required by N.J.S.A. 12A:9-502.

UCC FINANCING STATEMENT AMENDMENT**FOLLOW INSTRUCTIONS**

| | |
|---|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) JOHN DEERE FINANCIAL | 8884278713 |
| B. E-MAIL CONTACT AT FILER (optional) JDFUCCFILINGS@JOHndeere.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number **52538971**

12/01/20 11:02:42

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
52538971

1b. This FINANCING STATEMENT AMENDMENT is to be filed (or record) (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes:

AND Check one of these three boxes to:

This Change affects Debtor or Secured Party of record

CHANGE name and/or address: Complete

Item 6a or 6b; and item 7a or 7b and item 7c

ADD name: Complete item

7a or 7b, and item 7c

DELETE name: Give record name

to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete Assignment or Party Information Change - provide only one name (7a or 7b) (do not add, tell same; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

8c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral REBATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

JOHN DEERE CONSTRUCTION & FORESTRY COMPANY

OR

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|--|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | |
| Tarin Davidson | 8564286577 |
| B. E-MAIL CONTACT AT FILER (optional) | |
| tarin@cahill-law.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| Tarin Davidson 89 North Haddon Avenue Suite A Haddonfield, NJ 08033 US | |

State of New Jersey
 Department of the Treasury
 Division of Revenue & Enterprise Services
 UCC Section
 Filed

Filing Number: 51297541

08/25/15 9:16:04

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|---------|
| 1a. ORGANIZATION'S NAME | Assuncao Bros., Inc. | | | |
| OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 1c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 29 Wood Avenue | Edison | NJ | 08820 | US |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|---------|
| 2a. ORGANIZATION'S NAME | | | | |
| OR | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| | | | | |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|---------|
| 3a. ORGANIZATION'S NAME | Manasquan Bank | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 3c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 2221 Landmark Place | Manasquan | NJ | 08736 | US |

4. COLLATERAL: This financing statement covers the following collateral:

All of Debtor's assets, including but not limited to, all now owned or hereafter acquired, created or arising accounts, machinery, inventory, goods, furniture, fixtures, equipment, general intangibles, chattel paper, contract rights, documents, instruments, deposit accounts and investment property, and all cash and non-cash proceeds thereof (including, without limitation, insurance proceeds) and proceeds of proceeds. The collateral listed herein is within the scope of Chapter 9 of the Uniform Commercial Code adopted in New Jersey.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

6b. Check only if applicable and check only one box: Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

| | |
|---|---------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | 7327225666 |
| Erin Pensabene | |
| B. E-MAIL CONTACT AT FILER (optional) | epensabene@manasquan.bank |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| <p>Erin Pensabene 2221 Landmark Place Wall Township, NJ 08736 US</p> | |

State of New Jersey
 Department of the Treasury
 Division of Revenue & Enterprise Services
 UCC Section
 Filed

Filing Number: 51297541

07/21/20 12:27:09

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

| | |
|--|--|
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 51297541 | b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (or record) (or recorded) in the REAL ESTATE RECORDS (After, attach) Amendment Addendum Form UCC3Ad and provide Debtor's name in Item 13 |
| 2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement | |
| 3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in Item 7a or 7b, and address of Assignee in Item 7c and name of Assignor in Item 9 For partial assignment, complete Items 7 and 9 and also indicate affected collateral in Item 8 | |
| 4. <input checked="" type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law | |
| 5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: AND Check one of these three boxes to: This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record CHANGE name and/or address: Complete <input type="checkbox"/> Item 6a or 6b; and Item 7a or 7b and Item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in item 6a or 6b | |
| 6. CURRENT RECORD INFORMATION: Complete for Party information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change. Provide only one name (7a or 7b) (use exact, full name do not omit, initials, or abbreviations any part of the name is acceptable) 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | |
| 7c. MAILING ADDRESS | CITY STATE POSTAL CODE COUNTRY |
| 8. <input type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral: | |

| | |
|---|--|
| 9. NAME OF SECURED PARTY or RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME Manasquan Bank | |
| OR 9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX |
| 10. OPTIONAL FILER REFERENCE DATA: Assuncao Bros. Inc. | |

UCC FINANCING STATEMENT**FOLLOW INSTRUCTIONS**

| | |
|---|---------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | 8008585294 |
| CSC | |
| B. E-MAIL CONTACT AT FILER (optional) | NJSOSUCCFilingsV3@cscglobal.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| CSC 801 Adlai Stevenson Drive Springfield, IL 62703 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number 54009943

05/18/20 10:17:46

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|--|--------------------------|---------------------|-------------------------------|
| 1a. ORGANIZATION'S NAME ASSUNCAO BROS., INC. | | | |
| OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| | | | SUFFIX |
| 1c. MAILING ADDRESS 29 Wood Avenue | CITY EDISON | STATE NJ | POSTAL CODE 08820 |
| | | | COUNTRY US |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|-------------------------|--------------------------|---------------------|-------------------------------|
| 2a. ORGANIZATION'S NAME | | | |
| OR | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| | | | SUFFIX |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |
| | | | COUNTRY |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | |
|--|--------------------------|---------------------|-------------------------------|
| 3a. ORGANIZATION'S NAME Wells Fargo Vendor Financial Services, LLC | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| | | | SUFFIX |
| 3c. MAILING ADDRESS PO Box 35701 | CITY Billings | STATE MT | POSTAL CODE 59107 |
| | | | COUNTRY US |

4. COLLATERAL: This financing statement covers the following collateral:

This Financing Statement covers the equipment and other assets described below and/or on any annex, schedule and/or exhibit hereto (which is to be considered an integral part hereof), plus all existing and future replacements, exchanges and substitutions therefor, attachments, accessories, accessions and additions thereto, and insurance, lease, sublease and other proceeds thereof. Equipment: 1 Kobelco Excavator Hydraulic, Serial# YU0805553, Model# SK270SRLC5 The Collateral covered by this UCC-1 Financing Statement is within the scope of Chapter 9 of Title 12A of New Jersey Statutes

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

6b. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

450-0018868-000 1823 32845

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|---|-----------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | 8003313282 |
| Lien Solutions | |
| B. E-MAIL CONTACT AT FILER (optional) | uccfilingreturn@wolterskluwer.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 55356701

08/02/21 14:34:48

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 1d of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|--|---------------------|-------------------------------|----------------------|---------------|
| 1a. ORGANIZATION'S NAME ASSUNCAO BROS., INC. | OR | | | |
| 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 1c. MAILING ADDRESS 29 WOOD AVE. | CITY EDISON | STATE NJ | POSTAL CODE 08820 | COUNTRY US |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 1d of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|--------------------------|---------------------|-------------------------------|-------------|---------|
| 2a. ORGANIZATION'S NAME | OR | | | |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

| | | | | |
|---|---------------------|-------------------------------|----------------------|---------------|
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) | | | | |
| 3a. ORGANIZATION'S NAME Komatsu Financial Limited Partnership | | | | |
| 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 3c. MAILING ADDRESS 8770 W Bryn Mawr Ave Suite 100 | CITY Chicago | STATE IL | POSTAL CODE 60631 | COUNTRY US |

4. COLLATERAL: This financing statement covers the following collateral:
ONE (1) KOMATSU D39PX-24 Crawler Dozer, S/N# 95958 Which collateral is within the scope of Title 12A, Chapter 9 of the New Jersey Statutes. COMPLETE WITH ALL PRESENT ATTACHMENTS, ACCESSORIES, REPLACEMENT PARTS, ADDITIONS AND ALL PROCEEDS THEREOF

| | |
|---|---|
| 5. Check only if applicable and check only one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, Item 17 and Instructions) | <input type="checkbox"/> being administered by a Decedent's Personal Representative |
| 6a. Check only if applicable and check only one box: | 6b. Check only if applicable and check only one box: |
| <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility | <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing |
| 7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailee <input type="checkbox"/> Licensee/Licensor | |
| 8. OPTIONAL FILER REFERENCE DATA: 81761924 | |

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | |
|---|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | |
| CSC | 8008585294 |
| B. E-MAIL CONTACT AT FILER (optional) | |
| NJSOSUCCFilingsV3@cscglobal.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| <input checked="" type="checkbox"/> CSC 801 Adlai Stevenson Drive Springfield, IL 62703 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 55218535

05/17/21 15:27:50

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | | |
|--|--------------------------|---------------------|-------------------------------|-------------|
| 1a. ORGANIZATION'S NAME | | | | |
| Assuncao Bros. Inc. | | | | |
| OR | 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | 29 WOOD AVE | EDISON | NJ | 08820 |
| 1c. MAILING ADDRESS | | | | |
| 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here <input type="checkbox"/> and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad) | | | | |
| 2a. ORGANIZATION'S NAME | | | | |
| U.S. Small Business Administration | | | | |
| OR | 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |

| | | | | |
|---|--------------------------|---------------------|-------------------------------|-------------|
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) | | | | |
| 3a. ORGANIZATION'S NAME | | | | |
| U.S. Small Business Administration | | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | 3c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |

4. COLLATERAL: This financing statement covers the following collateral:
 All tangible and intangible personal property, including, but not limited to: (a) inventory, (b) equipment, (c) instruments, including promissory notes (d) chattel paper, including tangible chattel paper and electronic chattel paper, (e) documents, (f) letter of credit rights, (g) accounts, including health-care insurance receivables and credit card receivables, (h) deposit accounts, (i) commercial tort claims, (j) general intangibles, including payment intangibles and software and (k) as-extracted collateral as such terms may from time to time be defined in the Uniform Commercial Code. The security interest Borrower grants includes all accessions, attachments, accessories, parts, supplies and replacements for the Collateral, all products, proceeds and collections thereof and all records and data relating thereto. The collateral set forth herein is within the scope of Article 9 of the New Jersey Uniform Commercial Code, pursuant to 12A:9-102 and 12A:9-109
 686020 8903

| | | | | | | |
|---|--|---|--|---|--|--|
| 5. Check only if applicable and check only one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, Item 17 and Instructions) | | <input type="checkbox"/> being administered by a Decedent's Personal Representative | | | | |
| 6a. Check only if applicable and check only one box: | | 6b. Check only if applicable and check only one box: | | | | |
| <input type="checkbox"/> Public-Finance Transaction | <input type="checkbox"/> Manufactured-Home Transaction | <input type="checkbox"/> A Debtor is a Transmitting Utility | <input type="checkbox"/> Agricultural Lien | <input type="checkbox"/> Non-UCC Filing | | |
| 7. ALTERNATIVE DESIGNATION (if applicable): | | <input type="checkbox"/> Lessee/Lessor | <input type="checkbox"/> Consignee/Consignor | <input type="checkbox"/> Seller/Buyer | <input type="checkbox"/> Bailee/Balior | <input type="checkbox"/> Licensee/Licensor |
| 8. OPTIONAL FILER REFERENCE DATA: 2112 98149 | | | | | | |

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | | |
|--|---------------------------------|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | CSC | 8008585294 |
| B. E-MAIL CONTACT AT FILER (optional) | NJSOSUCCFilingsV3@cscglobal.com | |

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

CSC
801 Adlai Stevenson Drive
Springfield, IL 62703
US

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number:55131230

04/01/21 22:31:17

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|--|---------------------|-------------------------------|----------------------|
| 1a. ORGANIZATION'S NAME ASSUNCAO BROS., INC. | OR | | |
| 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 1c. MAILING ADDRESS 29 WOOD AVE | CITY EDISON | STATE NJ | POSTAL CODE 08820 |
| COUNTRY US | | | |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|--------------------------|---------------------|-------------------------------|-------------|
| 2a. ORGANIZATION'S NAME | OR | | |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 2c. MAILING ADDRESS | CITY | STATE | POSTAL CODE |
| COUNTRY | | | |

| | | | |
|---|--------------------------|---------------------|-------------------------------|
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNED SECURED PARTY): Provide only one Secured Party name (3a or 3b) | OR | | |
| 3a. ORGANIZATION'S NAME VFS US LLC | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| 3c. MAILING ADDRESS P.O. Box 26131 | CITY Greensboro | STATE NC | POSTAL CODE 27402 |
| COUNTRY US | | | |

4. COLLATERAL: This financing statement covers the following collateral:
2015 MACK GU713, VIN 1M2AX09C7FM022040 with the following attachments: BODY; together with all parts, accessories, attachments, substitutions, repairs, improvements and replacements and any and all cash and non-cash proceeds thereof, including, without limitation, insurance proceeds. The collateral set forth herein is within the scope of Article 9 of the Uniform Commercial Code as enacted in the state of this filing.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

6b. Check only if applicable and check only one box:

Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

501-7814448-001 2087 92688

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

JOHN DEERE FINANCIAL

8884278713

B. E-MAIL CONTACT AT FILER (optional)

JDFuccfilings@johndeere.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

JOHN DEERE FINANCIAL
 6400 NW 86TH ST
 JOHNSTON, IA 50131
 US

State of New Jersey
 Department of the Treasury
 Division of Revenue & Enterprise Services
 UCC Section
 Filed

Filing Number: 53186331

01/15/19 9:41:55

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME
ASSUNCAOFIRST PERSONAL NAME
MARTIN

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

1c. MAILING ADDRESS

7 HAZELWOOD CT

CITY

WARREN

STATE

NJ

POSTAL CODE

07059

COUNTRY

US

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

ASSUNCAO BROS., INC.

OR

2b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS

29 WOOD AVE

CITY

EDISON

STATE

NJ

POSTAL CODE

08820

COUNTRY

US

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME

JOHN DEERE CONSTRUCTION & FORESTRY COMPANY

OR

3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS

6400 NW 86TH ST

CITY

JOHNSTON

STATE

IA

POSTAL CODE

50131

COUNTRY

US

4. COLLATERAL: This financing statement covers the following collateral.

Interstate 50 Trailer S/N: 017111 together with (1) all attachments, accessories and components, repairs and improvements, (2) all accounts, general intangibles, contract rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without limitation, insurance, sale, lease and rental proceeds, and proceeds of proceeds.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

6b. Check only if applicable and check only one box:

Public-Finance Transaction

Manufactured-Home Transaction

A Debtor is a Transmitting Utility

Agricultural Lien

[UCC Filing](#)

7. ALTERNATIVE DESIGNATION (if applicable):

Lessee/Lessor

Consignee/Consignor

Seller/Buyer

Bailee/Bailor

Lienholder/Licensor

8. OPTIONAL FILER REFERENCE DATA:

3861758

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 53186331

01/15/19 9:41:55

OR

9a. ORGANIZATION'S NAME

ASSUNCAO

9b. INDIVIDUAL'S SURNAME

MARTIN

FIRST PERSONAL NAME

MARTIN

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR 11b. INDIVIDUAL'S SURNAME

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:

covers timber to be cut covers as-extracted collateral is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS:

The filer attests that the Collateral set forth in this Financing Statement is within the scope of the New Jersey Uniform Commercial Code-Secured Transactions pursuant to N.J.S.A. 12A:9-102 and N.J.S.A. 12A:9-109, as required by N.J.S.A. 12A:9-502.

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

| | | |
|--|---|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | JOHN DEERE FINANCIAL | 8884278713 |
| B. E-MAIL CONTACT AT FILER (optional) | JDFUCCFILINGS@JOHndeere.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 US | |

State of New Jersey
 Department of the Treasury
 Division of Revenue & Enterprise Services
 UCC Section
 Filed

Filing Number: 53186331

03/22/22 11:11:25

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

| | | | | |
|--|--------------------------|----------------------------------|---|--|
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER | 53186331 | | | 1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [or record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 |
| 2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement | | | | |
| 3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in Item 7c and name of Assignor in Item 9 For partial assignment, complete Items 7 and 9 and also indicate affected collateral in Item 8 | | | | |
| 4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law | | | | |
| 5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check <u>one</u> of these three boxes to: CHANGE name and/or address: Complete <input type="checkbox"/> Item 6a or 6b; and Item 7a or 7b and Item 7c ADD name: Complete item 7a or 7b, and item 7c DELETE name: Give record name to be deleted in Item 6a or 6b | | | | |
| 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b) 6a. ORGANIZATION'S NAME | | | | |
| OR | 6b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 7. CHANGED OR ADDED INFORMATION: <u>Change in Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)</u> 7a. ORGANIZATION'S NAME | | | | |
| OR | 7b. INDIVIDUAL'S SURNAME | INDIVIDUAL'S FIRST PERSONAL NAME | INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | |
| 7c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE |
| 8. <input type="checkbox"/> COLLATERAL CHANGE: Also check <u>one</u> of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral: | | | | |

| | | | | |
|---|--|---------------------|-------------------------------|--------|
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor | | | | |
| 9a. ORGANIZATION'S NAME | JOHN DEERE CONSTRUCTION & FORESTRY COMPANY | | | |
| OR | 9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | | |
|--|--|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | JOHN DEERE FINANCIAL | 8884278713 |
| B. E-MAIL CONTACT AT FILER (optional) | JDFuccfilings@johndeere.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | <input type="checkbox"/> JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 US | |

State of New Jersey
 Department of the Treasury
 Division of Revenue & Enterprise Services
 UCC Section
 Filed

Filing Number: 53083164

11/07/18 10:17:27

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|---|-----------------------------------|-------------------------------|--------------------------|
| 1a. ORGANIZATION'S NAME OR | | | |
| 1b. INDIVIDUAL'S SURNAME ASSUNCAO | FIRST PERSONAL NAME MARTIN | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 1c. MAILING ADDRESS 7 HAZELWOOD CT | CITY WARREN | STATE NJ | POSTAL CODE 07059 |
| COUNTRY US | | | |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|--|---------------------|-------------------------------|--------------------------|
| 2a. ORGANIZATION'S NAME OR | | | |
| 2b. INDIVIDUAL'S SURNAME ASSUNCAO BROS., INC. | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 2c. MAILING ADDRESS 29 WOOD AVE | CITY EDISON | STATE NJ | POSTAL CODE 08820 |
| COUNTRY US | | | |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | |
|--|----------------------|-------------------------------|--------------------------|
| 3a. ORGANIZATION'S NAME OR | | | |
| 3b. INDIVIDUAL'S SURNAME JOHN DEERE CONSTRUCTION & FORESTRY COMPANY | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 3c. MAILING ADDRESS 6400 NW 86TH ST | CITY JOHNSTON | STATE IA | POSTAL CODE 50131 |
| COUNTRY US | | | |

4. COLLATERAL: This financing statement covers the following collateral:

John Deere 85G Excavator S/N: 020077 Rockland 117A Hitch S/N: 87532 together with (1) all attachments, accessories and components, repairs and improvements, (2) all accounts, general intangibles, contract rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without limitation, insurance, sale, lease and rental proceeds, and proceeds of proceeds.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Debtor's Personal Representative

6a. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

3815204

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

| | |
|---|--------|
| 9a. ORGANIZATION'S NAME | |
| OR | |
| 9b. INDIVIDUAL'S SURNAME ASSUNCAO | |
| FIRST PERSONAL NAME MARTIN | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

Filing Number: 53083164

11/07/18 10:17:27

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

| | | | | |
|--|------|--------|-------------|---------|
| 10a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 10b. INDIVIDUAL'S SURNAME | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX | | |
| 10c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 11a. ORGANIZATION'S NAME | | | | |
| OR | | | | |
| 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 11c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

| | |
|--|---|
| 13. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) | 14. This FINANCING STATEMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input type="checkbox"/> is filed as a fixture filing |
| 15. Name and address of a RECORD OWNER of real estate described in Item 16 (if Debtor does not have a record interest): | 16. Description of real estate: |
| 17. MISCELLANEOUS: The filer attests that the Collateral set forth in this Financing Statement is within the scope of the New Jersey Uniform Commercial Code-Secured Transactions pursuant to N.J.S.A. 12A:9-102 and N.J.S.A. 12A:9-109, as required by N.J.S.A. 12A:9-502. | |

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

| | |
|---|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) JOHN DEERE FINANCIAL | 8884278713 |
| B. E-MAIL CONTACT AT FILER (optional) JDFuccfilings@johndeere.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 53083164

12/11/18 11:46:43

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

| | | | | |
|--|---|---------------------|-------------------------------|---------|
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 53083164 | 1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Filer attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13. | | | |
| 2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement. | | | | |
| 3. <input type="checkbox"/> ASSIGNMENT (full or partial). Provide name of Assignee in Item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9. For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8. | | | | |
| 4. <input type="checkbox"/> CONTINUATION. Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. | | | | |
| 5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check one of these two boxes: This Change affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check one of these three boxes: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b | | | | |
| 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME | | | | |
| OR | 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | | | |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) name; do not omit, modify, or change any part of the name. 7a. ORGANIZATION'S NAME | | | | |
| OR | 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | | | |
| 8. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 8. <input checked="" type="checkbox"/> COLLATERAL CHANGE: Also check one of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input checked="" type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral: JOHN DEERE 85G Excavator S/N: 020068 Rockland 117A Hitch S/N 87532 together with (1) all attachments, accessories and components, repairs and improvements, (2) all accounts, general intangibles, contract rights and chattel paper relating thereto, and (3) all proceeds, thereto including, without limitation, insurance, sale, lease and rental proceeds, and proceeds of proceeds | | | | |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment). If this is an Amendment: authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME JOHN DEERE CONSTRUCTION & FORESTRY COMPANY | | | | |
| OR | 9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 10. OPTIONAL FILER REFERENCE DATA: | | | | |

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form
53083164

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a ORGANIZATION'S NAME
JOHN DEERE CONSTRUCTION & FORESTRY COMPANY

OR
12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 53083164

12/11/18 11:46:43

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a. ORGANIZATION'S NAME

OR
13b. INDIVIDUAL'S SURNAME

ASSUNCAO

FIRST PERSONAL NAME

MARTIN

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral).

15. This FINANCING STATEMENT AMENDMENT:

covers timber to be cut covers as extracted collateral is filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in Item 17
(if Debtor does not have a record interest):

17. Description of real estate:

18. MISCELLANEOUS:

The filer attests that the Collateral set forth in this Financing Statement is within the scope of the New Jersey Uniform Commercial Code-Secured Transactions pursuant to N.J.S.A. 12A:9-102 and N.J.S.A. 12A:9-109, as required by N.J.S.A. 12A:9-502.

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

| | |
|---|-------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) JOHN DEERE FINANCIAL | 8884278713 |
| B. E-MAIL CONTACT AT FILER (optional) JDFUCCFILINGS@JOHndeere.com | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| JOHN DEERE FINANCIAL 6400 NW 86TH ST JOHNSTON, IA 50131 US | |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 53083164

08/28/20 10:56:11

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
53083164

This FINANCING STATEMENT AMENDMENT is to be filed [or record] (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) Debtor's name in Item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3. ASSIGNMENT (full or partial): Provide name of Assignee in Item 7a or 7b, and address of Assignee in Item 7c and name of Assignor in Item 9
For partial assignment, complete Items 7 and 9 and also indicate affected collateral in Item 8
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:Check one of these two boxes:This Change affects Debtor or Secured Party of recordAND Check one of these three boxes to:

CHANGE name and/or address: Complete Item 6a or 6b; and Item 7a or 7b and Item 7c

 ADD name: Complete Item 7a or 7b, and Item 7c DELETE name: Give record name to be deleted in Item 6a or 6b6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part of Interest Change (provide only one name in 7b) (use exact, full name in my name, initials, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

7c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

JOHN DEERE CONSTRUCTION & FORESTRY COMPANY

9b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

| | | |
|--|----------------|------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) | Scott A. Levin | 9739938100 |
|--|----------------|------------|

| | |
|---------------------------------------|---------------------|
| B. E-MAIL CONTACT AT FILER (optional) | slevin@mdmc-law.com |
|---------------------------------------|---------------------|

| |
|---|
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) |
|---|

| |
|---|
| Scott A. Levin 1300 Mt. Kemble Avenue P.O. Box 2075 Morristown, NJ 07962 US |
|---|

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number 56012125

06/09/22 12:48:16

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|-------------------------|---|------------------------------------|---|
| 1a. ORGANIZATION'S NAME | | | |
| OR | 1b. INDIVIDUAL'S SURNAME Assuncao | FIRST PERSONAL NAME Lisa | ADDITIONAL NAME(S)/INITIAL(S) |
| | 1c. MAILING ADDRESS 7 Hazelwood Ct. | CITY Warren | STATE NJ POSTAL CODE 07059 COUNTRY US |

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the individual Debtor information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)

| | | | |
|-------------------------|---|--------------------------------------|---|
| 2a. ORGANIZATION'S NAME | | | |
| OR | 2b. INDIVIDUAL'S SURNAME Assuncao | FIRST PERSONAL NAME Martin | ADDITIONAL NAME(S)/INITIAL(S) |
| | 2c. MAILING ADDRESS 7 Hazelwood Ct. | CITY Warren | STATE NJ POSTAL CODE 07059 COUNTRY US |

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

| | | | |
|---|--|----------------------|---|
| 3a. ORGANIZATION'S NAME NGM Insurance Company | | | |
| OR | 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) |
| | 3c. MAILING ADDRESS 55 West Street | CITY Keene | STATE NH POSTAL CODE 03431 COUNTRY US |

4. COLLATERAL: This financing statement covers the following collateral:

See attachment

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, Item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box:

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailee Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:
N0235-1065

UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

18. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; If line 1b was left blank because individual Debtor name did not fit, check here

| |
|--------------------------|
| 18a. ORGANIZATION'S NAME |
| |
| |

OR

| | |
|--|--------|
| 18b. INDIVIDUAL'S SURNAME Assuncao | |
| FIRST PERSONAL NAME Lisa | |
| ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

State of New Jersey
Department of the Treasury
Division of Revenue & Enterprise Services
UCC Section
Filed

Filing Number: 56012125

06/09/22 12:48:16

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

19. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (19a or 19b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| |
|---|
| 19a. ORGANIZATION'S NAME Assuncao Bros., Inc. a/k/a Assuncao Brothers, Inc. |
|---|

OR

| | | | | |
|--|-----------------------|-------------------------------|-----------------------------|----------------------|
| 19b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 19c. MAILING ADDRESS 29 Wood Avenue | CITY Edison | STATE NJ | POSTAL CODE 08820 | COUNTRY US |

20. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (20a or 20b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| |
|--------------------------|
| 20a. ORGANIZATION'S NAME |
|--------------------------|

OR

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 20b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 20c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

21. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name (21a or 21b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

| |
|--------------------------|
| 21a. ORGANIZATION'S NAME |
|--------------------------|

OR

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 21b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 21c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

22. ADDITIONAL SECURED PARTY'S NAME OR ASSIGNOR SECURED PARTY'S NAME: Provide only one name (22a or 22b)

| |
|--------------------------|
| 22a. ORGANIZATION'S NAME |
|--------------------------|

OR

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 22b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 22c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

23. ADDITIONAL SECURED PARTY'S NAME OR ASSIGNOR SECURED PARTY'S NAME: Provide only one name (23a or 23b)

| |
|--------------------------|
| 23a. ORGANIZATION'S NAME |
|--------------------------|

OR

| | | | | |
|---------------------------|---------------------|-------------------------------|-------------|---------|
| 23b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | |
| 23c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |

24. MISCELLANEOUS:

The filer attests that the Collateral set forth in this Financing Statement is within the scope of the New Jersey Uniform Commercial Code-Secured Transactions pursuant to N.J.S.A. 12A:9-102 and N.J.S.A. 12A:9-109, as required by N.J.S.A. 12A:9-502.



AGREEMENT OF INDEMNITY

THIS Agreement of Indemnity (hereinafter called Agreement) made and entered into this 30th day of January,
2019 by and between Assuncao Bros., Inc., 29 Wood Avenue, Edison, NJ 08820
as CONTRACTOR and
Martin Assuncao and Lisa Assuncao, 7 Hazelwood Court, Warren, NJ 07059

as INDEMNITORS, and The Company(s) (indicated above), as SURETY.

WHEREAS, the CONTRACTOR, in the performance of contracts and the fulfilment of obligations generally, whether solely in its own name or as co-venturer with others may desire, or be required, to give or procure certain BONDS, and;

WHEREAS, at the request of the CONTRACTOR and the INDEMNITORS and upon the express understanding that this Agreement should be given, the SURETY has executed or procured to be executed, and may from time to time hereafter execute or procure to be executed, said bonds on behalf of the CONTRACTOR, and;

WHEREAS, the INDEMNITORS have a substantial, material or beneficial interest in the obtaining, renewing, continuing, or substituting of the bonds, and;

WHEREAS, SURETY has relied upon and will continue to rely upon the representations of CONTRACTOR and INDEMNITORS as to their character, identity, control, beneficial ownership, financial condition and existence in executing or procuring bonds;

NOW THEREFORE, in consideration of the above stated premises, the CONTRACTOR and INDEMNITORS for themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, hereby covenant and agree with the SURETY, its successors and assigns, as follows:

DEFINITIONS

FIRST: Where they appear in this Agreement, the following terms are defined as set forth in this section:

BOND means an undertaking, a contract of suretyship, guaranty or indemnity, an agreement, consent or letter to provide such an undertaking or contract, and the continuation, extension, alteration, renewal or substitution of such an undertaking, contract, agreement, consent or letter, whether with the same or different penalties and conditions, executed or procured by the SURETY.

CONTRACT means an agreement between CONTRACTOR and a third party, together with all associated documents (including but not limited to general and special conditions, specifications and drawings) for which SURETY executes or procures the execution of a bond.

EVENT OF DEFAULT means any one or more of the following:

(A) Any declarations of default by an obligee on any BOND, abandonment, forfeiture, or breach of, or failure, refusal or inability to perform, any contract or obligation contained in a bond, whether actual or alleged;

(B) Any failure, delay, refusal or inability of the CONTRACTOR to pay claims, bills or other indebtedness incurred in, or in connection with the performance of any contract, to the extent due in whole or in part;

(C) The failure to perform, or comply with any of the terms, covenants or obligations in this Agreement;

(D) The failure to pay or discharge, when due, any indebtedness of the CONTRACTOR to the SURETY;

(E) An assignment by the CONTRACTOR for the benefit of creditors, or the appointment, or an application by the CONTRACTOR for the appointment, of a receiver or trustee for the CONTRACTOR or its property, whether insolvent or not, or an application by the CONTRACTOR for reorganization or arrangement under any bankruptcy laws of the United States or of any State, possession or territory of the United States, or if proceedings for the appointment of a receiver or trustee, for liquidation or for the reorganization or arrangement of the CONTRACTOR shall be initiated by other persons;

(F) If the CONTRACTOR or INDEMNITOR is an individual, the CONTRACTOR'S or INDEMNITOR'S death, absconding, disappearing, incompetency, being convicted of a felony or imprisoned, or if the CONTRACTOR or INDEMNITOR is any other type of entity, any change or threat of change in the character, identity, control, arrangement, beneficial ownership or existence of the CONTRACTOR or INDEMNITOR;

(G) Any proceeding or the exercise of any rights by any individual or entity which deprives or impairs CONTRACTOR'S use of its plant, machinery, equipment, plans, drawings, tools, supplies or materials;

(H) The happening of any event other than those specified in (A) through (G) which, in the SURETY'S sole opinion, may expose SURETY to loss, cost or expense.

CONTRACTOR means any one, combination of, or all of the named individuals, firms or corporations set forth including any of their present or future subsidiary corporations which they may now or hereafter control or be affiliated with, or their successors in interest, whether alone or in joint venture with others not named herein, including any such entity for which SURETY executes bonds.

SURETY means The Company(s) (indicated on Page 1), and its successors, assigns, affiliates, associates and subsidiary companies.

**NOTICE TO SURETY OF ANTICIPATED
CHANGE IN NATURE OF CONTRACTOR OR INDEMNITORS**

SECOND: Written notice must be given by CONTRACTOR or INDEMNITORS to SURETY at its Keene, New Hampshire bond office, located at 55 West Street, Keene, NH 03431, at the earliest practical time of any anticipated change or negotiations entered into by CONTRACTOR or INDEMNITORS for any anticipated change in the character, identity, control, arrangement, beneficial ownership (including, if a corporation, ownership of more than 5% of the stock of CONTRACTOR or INDEMNITOR), or existence of the CONTRACTOR or INDEMNITORS.

INDEMNITY AND HOLD HARMLESS

THIRD: The CONTRACTOR and INDEMNITORS shall exonerate, hold harmless, indemnify and keep indemnified the SURETY from and against any and all claims, demands and liability for losses, costs, and expenses of whatsoever kind or nature, including court costs, counsel fees, investigative costs, and from and against any and all other such losses and expenses which the SURETY may sustain or incur:

- (A) By reason of having executed or procured the execution of Bonds;
- (B) By reason of the failure of the CONTRACTOR or INDEMNITORS to perform or comply with any of the covenants or conditions of this agreement;
- (C) In enforcing any of the covenants or conditions of this Agreement;
- (D) In making any investigation, obtaining or attempting to obtain a release, or recovering or attempting to recover loss or unpaid bond premium in connection with any Bond;
- (E) In prosecuting or defending any action or claim in connection with any Bond, whether SURETY at its sole option elects to employ its own counsel, or permits or requires CONTRACTOR and INDEMNITORS to make arrangements for the SURETY'S legal representation.

Payment shall be made to the SURETY by the CONTRACTOR and INDEMNITORS as soon as liability exists or is asserted against the SURETY, whether or not the SURETY shall have made any payment thereof. Such payment shall be either equal to the amount of any reserve set by the SURETY, or equal to such amount as the SURETY, in its sole judgment, shall deem sufficient to protect it from loss. The SURETY shall have the right to use the deposit, or any part thereof, in payment or settlement of any liability, loss or expense for which the INDEMNITORS would be obligated to indemnify the SURETY under the terms of this Agreement.

In the event of any payment by the SURETY, the CONTRACTOR and INDEMNITORS further agree that in any accounting between the SURETY and the CONTRACTOR, or between the SURETY and the INDEMNITORS, or either or both of them, the SURETY shall be entitled to reimbursement for any and all disbursements made by it in good faith in and about the matters contemplated by this Agreement under the belief that it is or was liable for the sums and amounts so disbursed, or that it was necessary or expedient to make such disbursements, whether or not such liability, necessity, or expediency existed; and that the vouchers or other evidence of any such payments made by the SURETY shall be prima facie evidence of the fact and amount of the liability to the SURETY. In addition to the payments to be made to SURETY as set forth above, CONTRACTOR and INDEMNITOR agree to pay to SURETY interest on all disbursements made by SURETY at the maximum rate permitted by law calculated from the date of each disbursement.

ASSIGNMENT

FOURTH: The CONTRACTOR, and the INDEMNITORS as their interests may appear hereby assign, transfer and set over to SURETY the rights and property described hereafter, as collateral, to secure any and all obligations in this Agreement and any other indebtedness or liabilities of the CONTRACTOR to the SURETY, whether heretofore or hereafter incurred:

- (A) All the rights of the CONTRACTOR in, and arising in any manner out of any CONTRACT;
- (B) All the rights, title and interest of the CONTRACTORS or INDEMNITORS in and to all machinery, equipment, plant, tools, inventory and materials which are now, or may hereafter be, utilized in connection with any contract, regardless of whether they are located at a construction site, in storage elsewhere, or in transit anywhere;
- (C) All the rights, title and interest of the CONTRACTOR in and to all subcontracts and purchase orders let or about to be let in connection with any CONTRACT and in and to all SURETY bonds supporting such subcontracts or purchase orders;
- (D) All the rights, title and interest of the CONTRACTOR in and to any actions, causes of action, claims or demands whatsoever which the CONTRACTOR may have or acquire against any party to the CONTRACT, or actions, causes of action, claims or demands arising out of or in connection with any CONTRACT including but not limited to those against obligees on bonds, design professionals, subcontractors, laborers or materialmen or any person furnishing or agreeing to furnish or supply labor, material, supplies, machinery, tools, inventory or other equipment in connection with or on account of any CONTRACT and against any SURETY or sureties of any obligee, subcontractor, laborer, or materialmen;
- (E) All monies retained and any and all monies that may be due or hereafter become due to amount of any CONTRACT whether bonded or unbonded;
- (F) Any and all rights, title, interest in, or use of any patent, copyright or trade secret which is or may be necessary for the

completion of any bonded work; and

(G) All monies due or to become due to CONTRACTOR on any policy of insurance relating to any claims arising out of the performance of any CONTRACT, including, but not limited to, claims under builders risk, fire, employee dishonesty or workers compensation insurance policies, including premium refunds.

The assignments shall become effective as of the effective date of each bond executed by SURETY. The SURETY agrees to forebear exercising the rights granted to it under this Fourth section until the occurrence of an EVENT OF DEFAULT.

SETTLEMENTS

FIFTH: SURETY shall have the exclusive right in its name or in the name of the CONTRACTOR to adjust, settle or compromise any claim, counterclaim, demand, suit or judgment involving any bond or to take whatever other action it may deem necessary, expedient or appropriate. SURETY'S determination as to whether any such claim, counterclaim, demand, suit or judgment should be settled or defended shall be binding and conclusive upon the CONTRACTOR and INDEMNITORS.

PROSECUTION OF CLAIMS

SIXTH: SURETY shall have the full and exclusive right, in its name or in the name of the CONTRACTOR, but not the obligation, to prosecute, compromise, release or otherwise resolve any of the claims, causes of action or other rights assigned to SURETY in the fourth paragraph above, entitled assignment, upon such terms as SURETY, in its sole discretion shall deem appropriate.

PREMIUMS

SEVENTH: The CONTRACTOR and INDEMNITORS will pay to the SURETY all premiums and charges of the SURETY for the bonds.

TRUST FUND

EIGHTH: The CONTRACTOR and INDEMNITORS covenant and agree that all payments received for or on account of any CONTRACT shall be held in trust as a trust fund for the payment of obligations incurred or to be incurred in the performance of any CONTRACT and for labor, materials and services furnished in the prosecution of the work in any CONTRACT or any extension of modification thereof. It is expressly understood and declared that all monies due and to become due under any CONTRACT are also trust funds, whether in the possession of the CONTRACTOR or INDEMNITORS or otherwise. The trust funds shall be for the benefit and payment of all obligations for which the SURETY may be liable under any bonds. The trust shall incur to the benefit of the SURETY for any liability or loss it may have or sustain any bond, and this agreement and declaration constitute notice of such trust.

PERFECTION OF SECURITY INTEREST

NINTH: This agreement shall constitute a security agreement for the benefit of the SURETY and also a financing statement, both in accordance with the provisions of the Uniform Commercial Code or similar statute and may be so used by the SURETY without in any way abrogating, restricting or limiting the rights of the SURETY under this Agreement or under law or in equity. SURETY may add such schedules to this Agreement describing specific items of security covered hereunder as shall be necessary.

TAKEOVER

TENTH: Upon the occurrence of an EVENT OF DEFAULT, the SURETY shall have the right, but at its option and in its sole discretion and is hereby authorized, with or without exercising any other right or option conferred upon it by law or by the terms of this Agreement, to take possession of any part or all of the work under any CONTRACT, and at the expense of the CONTRACTOR and INDEMNITORS to complete or arrange for the completion of the same.

CHANGES

ELEVENTH: The SURETY, at its sole option, is authorized and empowered, without notice to or knowledge of the INDEMNITORS, to agree or refuse to agree to any change whatsoever in any bond, or any CONTRACT, including, but not limited to, any change in the time for the completion of any CONTRACT and to payments or advances thereunder before the same may be due, and to assent to or take any assignment or assignments, to execute or consent to the execution of any continuations, extensions or renewals of any bond and to execute any substitute or substitutes therefore, with the same or different conditions, provisions and obligees and with the same or larger or smaller penalties. It is expressly understood and agreed that the INDEMNITORS shall remain bound under the terms of this Agreement even though any such assent by the SURETY does or might substantially increase the liability of said INDEMNITORS.

ADVANCES

TWELFTH: The SURETY, at its sole option, is authorized and empowered to guarantee loans, to advance or lend to, or for the account of, the CONTRACTOR any money, which the SURETY in its sole discretion may see fit to do, reserving to itself, however, the absolute right to cancel any such guarantee and to cease advancing or lending money to the CONTRACTOR or for the account of the CONTRACTOR with or without cause and with or without notice to the CONTRACTOR. All money expended by the SURETY, or lent or advanced from time to, or for the account of, the CONTRACTOR or guaranteed by the SURETY, and all related costs and expenses incurred by the SURETY, shall be loss to the SURETY for which the CONTRACTOR and the INDEMNITORS shall be responsible, notwithstanding that said money or any part thereof should not be so used by the CONTRACTOR.

BOOKS AND RECORDS

THIRTEENTH: At any time, and until such time as the liability of the SURETY under all bonds is terminated or SURETY is fully reimbursed all amounts due to it under the Agreement, the SURETY shall have the right of access to the books, records, accounts, and documents of the CONTRACTOR and INDEMNITORS, wherever located, for the purpose of inspection, copying or reproduction. Any financial institution, depository, materialman, supply house, or other person, firm, or corporation, when requested by the SURETY, is hereby authorized to furnish the SURETY any information requested, including, but not limited to, the status of the work under any CONTRACT.

being performed by the CONTRACTOR, the condition of the performance of any CONTRACT and payments of accounts. Upon the occurrence of an EVENT OF DEFAULT, CONTRACTOR and INDEMNITORS, upon SURETY'S request, shall immediately turn over to SURETY, or its designee, at a place and in a manner designated by SURETY such books, records, accounts, documents and CONTRACTS in whatever form, as requested by SURETY.

DECLINE EXECUTION

FOURTEENTH: CONTRACTOR and INDEMNITORS are not obligated to request the SURETY to execute, provide or procure any bond required of them in the performance and fulfillment of obligations; furthermore the SURETY has the right to decline to execute, provide or procure any bond requested by CONTRACTOR. If SURETY does execute, provide or procure the execution of a bid bond or proposal bond, or agrees or consents to provide such CONTRACT of suretyship, SURETY retains the right to decline to execute the final bond (including, but not limited to, performance, payment or maintenance bond(s)) that may be required in connection with any award that may be made under the bid proposal or tender to which the bid proposal bond or agreement or consent to provide such CONTRACT of suretyship is given.

WAIVER OF NOTICE

FIFTEENTH: The INDEMNITORS hereby waive notice of the execution of any bond and of the acceptance of this agreement. CONTRACTOR and INDEMNITORS hereby waive all notice of any default, payment or any other act or acts giving rise to any claim under any bond, as well as notice of any and all liability of the SURETY under any bond, and any and all liability on their part hereunder, to the end and effect that, the CONTRACTOR and the INDEMNITORS shall be and continue liable hereunder.

SUITS

SIXTEENTH: Separate suits may be brought by SURETY to enforce the terms of this agreement as causes of action accrue, and the bringing of suit or the recovery of judgment upon any cause of action shall not prejudice or bar the bringing of other suits upon other causes of action, whether previously or subsequently arising.

The CONTRACTOR and each INDEMNITOR is the agent for the CONTRACTOR and all INDEMNITORS for the purpose of accepting service of any process in the jurisdiction on which the CONTRACTOR or INDEMNITORS accepting the process resides, is domiciled, is doing business or is found.

In the event SURETY shall file suit at law or in equity to enforce the terms of this agreement, SURETY shall be entitled to recover its own attorneys' fees and expenses in connection with such suit.

SET OFF

SEVENTEENTH: SURETY may reduce the amount of CONTRACTOR'S and INDEMNITOR'S(S') liability to SURETY hereunder by applying to such liability any money payable to CONTRACTOR and/or INDEMNITORS by SURETY. The money payable to CONTRACTOR or INDEMNITORS may be, but is not limited to, any money payable by SURETY as an insurer of CONTRACTOR or INDEMNITORS or as an insurer of any other individual or legal entity, or any money payable to CONTRACTOR or INDEMNITORS as a return of unearned or other premiums, or money payable to settle a claim of CONTRACTOR or INDEMNITORS against SURETY or any individual or other legal entity insured or bonded by SURETY.

OTHER SURETIES

EIGHTEENTH: If the SURETY procures the execution of any bond by other sureties, or executes the bonds with co-sureties or reinsures any portion of said bonds with reinsuring sureties, then all the terms and conditions of this agreement shall inure to the benefit of such other sureties, co-sureties and reinsuring sureties, as their interests may appear.

TERMINATION

NINETEENTH: IF CONTRACTOR or INDEMNITORS previously executed an agreement in favor of SURETY, SURETY'S accepting this agreement neither terminates such previous agreement nor relieves CONTRACTOR or INDEMNITORS from liability to SURETY.

This agreement may be terminated as to CONTRACTOR or any INDEMNITORS upon written notice to SURETY by CONTRACTOR or INDEMNITORS, or by CONTRACTOR'S or INDEMNITOR'S legal representatives or successors, by registered or certified mail addressed to SURETY at its home office at The Bond Department, 55 West Street, Keene, New Hampshire 03431.

Termination of this agreement shall not be effective until thirty (30) days after receipt of said written notice by SURETY.

Termination of this agreement shall not relieve the CONTRACTOR or INDEMNITORS from liability to SURETY arising out of bonds executed, provided or procured by SURETY on behalf of CONTRACTOR prior to the effective date of such termination and for which this agreement is part of the consideration on which SURETY relied in executing, providing or procuring such bonds.

It is understood and agreed that oral notice to or constructive notice to any agent or employee of SURETY shall not constitute effective notice of termination under this agreement.

NOTIFICATION TO INDEMNITORS

TWENTIETH: The INDEMNITORS agree among themselves and hereby acknowledge to SURETY that notification by SURETY to any one INDEMNITOR shall constitute notification to all INDEMNITORS.

SUBORDINATION OF INDEMNITORS

TWENTY-FIRST: The CONTRACTOR and INDEMNITORS waive and subordinate all rights of indemnity, subrogation and contribution each against the other until all obligations to the SURETY under this agreement, at law or in equity, have been satisfied in full.

HOMESTEAD

TWENTY-SECOND: The CONTRACTOR and the INDEMNITORS hereby waive, to the extent permitted by law, so far as their respective obligations under this agreement are concerned, all rights to claim any of their property including their respective homesteads, as exempt from levy, execution, sale or other legal process under the laws of any State, Territory or Possession.

POWER OF ATTORNEY

TWENTY-THIRD: The CONTRACTOR and INDEMNITORS hereby irrevocably nominate, constitute, appoint and designate the SURETY, through its authorized representative(s), as their attorney-in-fact with the right but not the obligation, to exercise all of the rights of the CONTRACTOR and INDEMNITORS assigned, transferred and set over to SURETY in this agreement, and in the name of the CONTRACTOR and INDEMNITORS to make, execute, and deliver any and all additional or other assignments, documents, or papers, checks, drafts, warrants or other instruments made or issued in payment of any obligation to which SURETY has the right to receipt of payment pursuant to this agreement deemed necessary and proper by the SURETY in order to give full effect not only to the intent and meaning of the within assignments, but also to the full protection intended to be herein given to the SURETY under all other provisions of this Agreement. The CONTRACTORS and INDEMNITORS hereby ratify and confirm all acts and actions taken and done by SURETY as such attorney-in-fact.

SEVERABILITY AND PARTIAL EXECUTION

TWENTY-FOURTH: If any provision or provisions, or portion thereof, of this agreement shall be void or unenforceable under the laws of any jurisdiction governing its construction, this agreement shall not be void or vitiated thereby, but shall be construed and enforced within the same effect as though such provision or provisions, or portion thereof, were omitted.

In case any of the parties mentioned in this agreement fail to execute the same, or in case the execution hereof by any of the parties shall be defective or invalid for any reason, such failure, defect or invalidity shall not in any manner affect the validity of this agreement or the liability hereunder of any of the parties executing the same, but each and every party so executing shall be and remain fully bound and liable hereunder to the same extent as if such failure, defect or invalidity had not existed.

NOTICE TO SURETY

TWENTY-FIFTH: The CONTRACTOR and INDEMNITORS shall promptly provide written notice to the SURETY at the Bond Department, 55 West Street, Keene, New Hampshire 03431, of either of the following events:

- (1) Notice by any obligee on any bond to the CONTRACTOR that the CONTRACTOR is in default or has failed or refused to perform any CONTRACT obligation;
- (2) Notice by any obligee on any bond to the CONTRACTOR that the CONTRACTOR cure its performance or show cause as to why the CONTRACTOR should not be terminated for default.

GENERAL PROVISIONS

TWENTY-SIXTH: SURETY'S rights hereunder shall be deemed to be cumulative with, and in addition to, all other rights of SURETY, however derived. SURETY is not required to exhaust its remedies or rights against CONTRACTOR or to await receipt of any final dividends from the CONTRACTOR before asserting its rights against any one or more INDEMNITORS.

This agreement is to be liberally construed so as to protect, exonerate and indemnify SURETY.

The paragraph titles as contained in this agreement are descriptive only and do not restrict or modify the terms of this agreement. In the event of any inconsistency between the paragraph titles and the terms of this Agreement, the terms of this Agreement shall control.

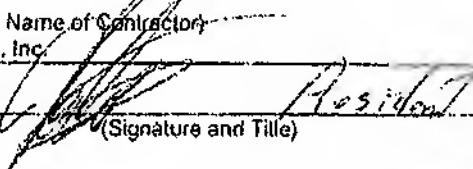
WAIVER AND MODIFICATION

TWENTY-SEVENTH: The rights and remedies afforded to the SURETY by the terms of this agreement may not be waived or modified orally and no written change or modification shall be effective until signed by an employee of the SURETY.

MERGER AND CONSOLIDATION

TWENTY-EIGHTH: THE CONTRACTOR AND INDEMNITORS HAVE READ AND UNDERSTAND THIS AGREEMENT. EXCEPT FOR ANY PREVIOUS INDEMNITY AGREEMENT EXECUTED BY CONTRACTOR OR INDEMNITORS THIS AGREEMENT OF INDEMNITY CONSTITUTES THE ENTIRE AGREEMENT BETWEEN THE PARTIES. NO OTHER SEPARATE AGREEMENTS OR UNDERSTANDING, PAST, PRESENT OR FUTURE WHETHER ORAL OR WRITTEN CHANGE THE TERMS OF THIS AGREEMENT.

Address: 29 Wood Avenue Contractor: (Full Name of Contractor) Assuncao Bros., Inc.

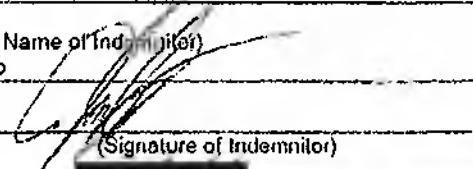
Edison, NJ 08820 By:  President
(Signature and Title)

SS # or ID #: 

Address: Contractor: (Full Name of Contractor)

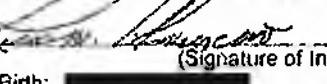
SS # or ID #: 

Address: 7 Hazelwood Court Indemnitor: (Full Name of Indemnitor) Martin Assuncao

Warren, NJ 07059 By: 
(Signature of Indemnitor)

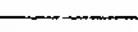
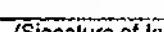
SS #:  Date of Birth: 

Address: 7 Hazelwood Court Indemnitor: (Full Name of Indemnitor) Lisa Assuncao

Warren, NJ 07059 By: 
(Signature of Indemnitor)

SS #:  Date of Birth: 

Address: Indemnitor: (Full Name of Indemnitor)

SS #:  Date of Birth: 

Address: Indemnitor: (Full Name of Indemnitor)

SS #:  Date of Birth: 

** Personal, corporate and partnership acknowledgements and additional signature pages if necessary will be added to this Agreement as addendums.

* Attention Notaries * Please type or print your name below your signature and include your address.

CORPORATION NOTARIZATION(S)

State of New Jersey)
) ss:
County of MIDDLESEX)

On this 30th-day of July, 2019 before me personally came Martin Assuncao to me known, who, being by me duly sworn, did depose and say that he/she resides in Warren, NJ that he/she is the President of the Assuncao Bros., Inc. corporation which executed the foregoing instrument: that he/she knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of the said corporation; and that he/she signed his/her name to the said instrument by like order.

Notary's Address:

121 Norman Ct.
Maplewood NJ 07737



State of _____)
) ss:
County of _____)

On this _____ day of _____ before me personally came _____ to me known, who, being by me duly sworn, did depose and say that he/she resides in _____ that he/she is the _____ of the _____ corporation which executed the foregoing instrument: that he/she knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of the said corporation; and that he/she signed his/her name to the said instrument by like order.

Notary's Address:

Notary: _____
My Commission Expires: _____

* Attention Notaries * Please type or print your name below your signature and include your address.

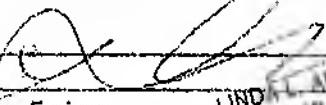
INDIVIDUAL NOTARIZATION(S)

State of New Jersey)
County of SOMERSET)
ss:

On this 25th day of JULY, 2011, before me personally came Martin Assuncao and Lisa Assuncao to me known, and known to me to be the individual(s) who executed the foregoing instrument, and that (she) (he) (they) executed the same.

Notary's Address:

131 NORMANDI CT
ABRAMSIDE NJ 07717

Notary: 
My Commission Expires: LINDA AURELIA MURKIN
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 3/31/2020

State of _____)

ss:
County of _____)

On this _____ day of _____, _____, before me personally came _____ to me known, and known to me to be the individual(s) who executed the foregoing instrument, and that (she) (he) (they) executed the same.

Notary's Address:

Notary: _____
My Commission Expires: _____

PARTNERSHIP NOTARIZATION(S)

State of _____)

ss:
County of _____)

On this _____ day of _____, _____, before me personally came _____ to me known, and known to me to be one of the firm of _____, and acknowledge that he/she executed the foregoing instrument as the act of the said firm.

Notary's Address:

Notary: _____
My Commission Expires: _____

State of _____)

ss:
County of _____)

On this _____ day of _____, _____ before me personally came _____ to me known, and known to me to be one of the firm of _____, and acknowledge that he/she executed the foregoing instrument as the act of the said firm.

Notary's Address:

Notary: _____
My Commission Expires: _____



THE MAIN STREET AMERICA GROUP

**NGM Insurance Company • Old Dominion Insurance Company
Main Street America Assurance Company • MSA Insurance Company
Information Systems and Services Corporation**



ADDENDUM TO AGREEMENT OF INDEMNITY

To be attached to and form a part of Agreement of Indemnity dated January 30, 2019 between Assuncao Bros., Inc. as Contractor, Martin Assuncao and Lisa Assuncao as Indemnitors and NGM Insurance Company as Surety.

It is Agreed that:

Anything in said Agreement of Indemnity to the contrary notwithstanding, Surety shall not proceed in any manner against Indemnitors' respective principal personal residence(s), as defined in the Addendum, in enforcing its rights under said Agreement.

Said principal personal residence(s) are at present as follows:

| | |
|---------------------------------------|----------------------|
| <u>Address of Residence</u> | <u>Indemnitor(s)</u> |
| 7 Hazelwood Court Warren, NJ 07059 | Martin Assuncao |
| 7 Hazelwood Court Warren, NJ 07059 | Lisa Assuncao |

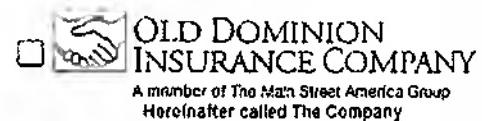
In the event that principal personal residence(s) is sold, assigned, conveyed or in any other manner transferred, this Addendum shall apply only to that real property acquired as a replacement or substitute therefore.

"Principal personal residence", as used in this Addendum, shall mean that place which constitutes as indemnitor's true, fixed and permanent home and principal establishment to which, whenever absent, there is the intention of returning.

This Addendum shall become effective simultaneously with the Execution of the Agreement of Indemnity of which this forms as part of.

 NGM Insurance Company

Keene Office
55 West Street, Keene, NH 03431-3374 • (800) 258-5310



AGREEMENT OF INDEMNITY

THIS Agreement of indemnity (hereinafter called Agreement) made and entered into this 20th day of July, 2012 by and between Assuncao Brothers, Inc., as CONTRACTOR and Martin Assuncao and Lisa M. Assuncao, as INDEMNITORS, and The Company(s) (indicated above), as SURETY.

WHEREAS, the CONTRACTOR, in the performance of contracts and the fulfillment of obligations generally, whether solely in its own name or as co-venturer with others may desire, or be required, to give or procure certain BONDS, and;

WHEREAS, at the request of the CONTRACTOR and the INDEMNITORS and upon the express understanding that this Agreement should be given, the SURETY has executed or procured to be executed, and may from time to time hereafter execute or procure to be executed, said bonds on behalf of the CONTRACTOR, and;

WHEREAS, the INDEMNITORS have a substantial, material or beneficial interest in the obtaining, renewing, continuing, or substituting of the bonds, and;

WHEREAS, SURETY has relied upon and will continue to rely upon the representations of CONTRACTOR and INDEMNITORS as to their character, identity, control, beneficial ownership, financial condition and existence in executing or procuring bonds;

NOW THEREFORE, in consideration of the above stated premises, the CONTRACTOR and INDEMNITORS for themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, hereby covenant and agree with the SURETY, its successors and assigns, as follows:

DEFINITIONS

FIRST: Where they appear in this Agreement, the following terms are defined as set forth in this section:

BOND means an undertaking, a contract of suretyship, guaranty or indemnity, an agreement, consent or letter to provide such an undertaking or contract, and the continuation, extension, alteration, renewal or substitution of such an undertaking, contract, agreement, consent or letter, whether with the same or different penalties and conditions, executed or procured by the SURETY.

CONTRACT means an agreement between CONTRACTOR and a third party, together with all associated documents (including but not limited to general and special conditions, specifications and drawings) for which SURETY executes or procures the execution of a bond.

EVENT OF DEFAULT means any one or more of the following:

(A) Any declarations of default by an obligee on any BOND, abandonment, forfeiture, or breach of, or failure, refusal or inability to perform, any contract or obligation contained in a bond, whether actual or alleged;

(B) Any failure, delay, refusal or inability of the CONTRACTOR to pay claims, bills or other indebtedness incurred in, or in connection with the performance of any contract, to the extent due in whole or in part;

(C) The failure to perform, or comply with any of the terms, covenants or obligations in this Agreement;

(D) The failure to pay or discharge, when due, any indebtedness of the CONTRACTOR to the SURETY;

(E) An assignment by the CONTRACTOR for the benefit of creditors, or the appointment, or an application by the CONTRACTOR for the appointment, of a receiver or trustee for the CONTRACTOR or its property, whether insolvent or not, or an application by the CONTRACTOR for reorganization or arrangement under any bankruptcy laws of the United States or of any State, possession or territory of the United States, or if proceedings for the appointment of a receiver or trustee, for liquidation or for the reorganization or arrangement of the CONTRACTOR shall be initiated by other persons;

(F) If the CONTRACTOR or INDEMNITOR is an individual, the CONTRACTOR'S or INDEMNITOR'S death, absconding, disappearing, incompetency, being convicted of a felony or imprisoned, or if the CONTRACTOR or INDEMNITOR is any other type of entity, any change or threat of change in the character, identity, control, arrangement, beneficial ownership or existence of the CONTRACTOR or INDEMNITOR;

(G) Any proceeding or the exercise of any rights by any individual or entity which deprives or impairs CONTRACTOR'S use of its plant, machinery, equipment, plans, drawings, tools, supplies or materials;

(H) The happening of any event other than those specified in (A) through (G) which, in the SURETY'S sole opinion, may expose SURETY to loss, cost or expense.

CONTRACTOR means any one, combination of, or all of the named individuals, firms or corporations set forth including any of their present or future subsidiary corporations which they may now or hereafter control or be affiliated with, or their successors in interest, whether alone or in joint venture with others not named herein, including any such entity for which SURETY executes bonds.

SURETY means The Company(s) (indicated on Page 1), and its successors, assigns, affiliates, associates and subsidiary companies.

**NOTICE TO SURETY OF ANTIPLICATED
CHANGE IN NATURE OF CONTRACTOR OR INDEMNITORS**

SECOND: Written notice must be given by CONTRACTOR or INDEMNITORS to SURETY at its Keene, New Hampshire bond office, located at 55 West Street, Keene, NH 03431, at the earliest practical time of any anticipated change or negotiations entered into by CONTRACTOR or INDEMNITORS for any anticipated change in the character, identity, control, arrangement, beneficial ownership (including, if a corporation, ownership of more than 5% of the stock of CONTRACTOR or INDEMNITOR), or existence of the CONTRACTOR or INDEMNITORS.

INDEMNITY AND HOLD HARMLESS

THIRD: The CONTRACTOR and INDEMNITORS shall exonerate, hold harmless, indemnify and keep indemnified the SURETY from and against any and all claims, demands and liability for losses, costs, and expenses of whatsoever kind or nature, including court costs, counsel fees, investigative costs, and from and against any and all other such losses and expenses which the SURETY may sustain or incur:

- (A) By reason of having executed or procured the execution of Bonds;
- (B) By reason of the failure of the CONTRACTOR or INDEMNITORS to perform or comply with any of the covenants or conditions of this agreement;
- (C) In enforcing any of the covenants or conditions of this Agreement;
- (D) In making any investigation, obtaining or attempting to obtain a release, or recovering or attempting to recover loss or unpaid bond premium in connection with any Bond;
- (E) In prosecuting or defending any action or claim in connection with any Bond, whether SURETY at its sole option elects to employ its own counsel, or permits or requires CONTRACTOR and INDEMNITORS to make arrangements for the SURETY'S legal representation.

Payment shall be made to the SURETY by the CONTRACTOR and INDEMNITORS as soon as liability exists or is asserted against the SURETY, whether or not the SURETY shall have made any payment thereof. Such payment shall be either equal to the amount of any reserve set by the SURETY, or equal to such amount as the SURETY, in its sole judgment, shall deem sufficient to protect it from loss. The SURETY shall have the right to use the deposit, or any part thereof, in payment or settlement of any liability, loss or expense for which the INDEMNITORS would be obligated to indemnify the SURETY under the terms of this Agreement.

In the event of any payment by the SURETY, the CONTRACTOR and INDEMNITORS further agree that in any accounting between the SURETY and the CONTRACTOR, or between the SURETY and the INDEMNITORS, or either or both of them, the SURETY shall be entitled to reimbursement for any and all disbursements made by it in good faith in and about the matters contemplated by this Agreement under the belief that it is or was liable for the sums and amounts so disbursed, or that it was necessary or expedient to make such disbursements, whether or not such liability, necessity, or expediency existed; and that the vouchers or other evidence of any such payments made by the SURETY shall be prima facie evidence of the fact and amount of the liability to the SURETY. In addition to the payments to be made to SURETY as set forth above, CONTRACTOR and INDEMNITOR agree to pay to SURETY interest on all disbursements made by SURETY at the maximum rate permitted by law calculated from the date of each disbursement.

ASSIGNMENT

FOURTH: The CONTRACTOR, and the INDEMNITORS as their interests may appear hereby assign, transfer and set over to SURETY the rights and property described hereafter, as collateral, to secure any and all obligations in this Agreement and any other indebtedness or liabilities of the CONTRACTOR to the SURETY, whether heretofore or hereafter incurred:

- (A) All the rights of the CONTRACTOR in, and arising in any manner out of any CONTRACT;
- (B) All the rights, title and interest of the CONTRACTORS or INDEMNITORS in and to all machinery, equipment, plant, tools, inventory and materials which are now, or may hereafter be, utilized in connection with any contract, regardless of whether they are located at a construction site, in storage elsewhere, or in transit anywhere;
- (C) All the rights, title and interest of the CONTRACTOR in and to all subcontracts and purchase orders let or about to be let in connection with any CONTRACT and in and to all SURETY bonds supporting such subcontracts or purchase orders;
- (D) All the rights, title and interest of the CONTRACTOR in and to any actions, causes of action, claims or demands whatsoever which the CONTRACTOR may have or acquire against any party to the CONTRACT, or actions, causes of action, claims or demands arising out of or in connection with any CONTRACT including but not limited to those against obligees on bonds, design professionals, subcontractors, laborers or materialmen or any person furnishing or agreeing to furnish or supply labor, material, supplies, machinery, tools, inventory or other equipment in connection with or on account of any CONTRACT and against any SURETY or sureties of any obligee, subcontractor, laborer, or materialmen;
- (E) All monies retained and any and all monies that may be due or hereafter become due to amount of any CONTRACT whether bonded or unbonded;
- (F) Any and all rights, title, interest in, or use of any patent, copyright or trade secret which is or may be necessary for the

completion of any bonded work; and

(G) All monies due or to become due to CONTRACTOR on any policy of insurance relating to any claims arising out of the performance of any CONTRACT, including, but not limited to, claims under builders risk, fire, employee dishonesty or workers compensation insurance policies, including premium refunds.

The assignments shall become effective as of the effective date of each bond executed by SURETY. The SURETY agrees to forebear exercising the rights granted to it under this Fourth section until the occurrence of an EVENT OF DEFAULT.

SETTLEMENTS

FIFTH: SURETY shall have the exclusive right in its name or in the name of the CONTRACTOR to adjust, settle or compromise any claim, counterclaim, demand, suit or judgment involving any bond or to take whatever other action it may deem necessary, expedient or appropriate. SURETY'S determination as to whether any such claim, counterclaim, demand, suit or judgment should be settled or defended shall be binding and conclusive upon the CONTRACTOR and INDEMNITORS.

PROSECUTION OF CLAIMS

SIXTH: SURETY shall have the full and exclusive right, in its name or in the name of the CONTRACTOR, but not the obligation, to prosecute, compromise, release or otherwise resolve any of the claims, causes of action or other rights assigned to SURETY in the fourth paragraph above, entitled assignment, upon such terms as SURETY, in its sole discretion shall deem appropriate.

PREMIUMS

SEVENTH: The CONTRACTOR and INDEMNITORS will pay to the SURETY all premiums and charges of the SURETY for the bonds.

TRUST FUND

EIGHTH: The CONTRACTOR and INDEMNITORS covenant and agree that all payments received for or on account of any CONTRACT shall be held in trust as a trust fund for the payment of obligations incurred or to be incurred in the performance of any CONTRACT and for labor, materials and services furnished in the prosecution of the work in any CONTRACT or any extension or modification thereof. It is expressly understood and declared that all monies due and to become due under any CONTRACT are also trust funds, whether in the possession of the CONTRACTOR or INDEMNITORS or otherwise. The trust funds shall be for the benefit and payment of all obligations for which the SURETY may be liable under any bonds. The trust shall incur to the benefit of the SURETY for any liability or loss it may have or sustain any bond, and this agreement and declaration constitute notice of such trust.

PERFECTION OF SECURITY INTEREST

NINTH: This agreement shall constitute a security agreement for the benefit of the SURETY and also a financing statement, both in accordance with the provisions of the Uniform Commercial Code or similar statute and may be so used by the SURETY without in any way abrogating, restricting or limiting the rights of the SURETY under this Agreement or under law or in equity. SURETY may add such schedules to this Agreement describing specific items of security covered hereunder as shall be necessary.

TAKEOVER

TENTH: Upon the occurrence of an EVENT OF DEFAULT, the SURETY shall have the right, but at its option and in its sole discretion and is hereby authorized, with or without exercising any other right or option conferred upon it by law or by the terms of this Agreement, to take possession of any part or all of the work under any CONTRACT, and at the expense of the CONTRACTOR and INDEMNITORS to complete or arrange for the completion of the same.

CHANGES

ELEVENTH: The SURETY, at its sole option, is authorized and empowered, without notice to or knowledge of the INDEMNITORS, to agree or refuse to agree to any change whatsoever in any bond, or any CONTRACT, including, but not limited to, any change in the time for the completion of any CONTRACT and to payments or advances thereunder before the same may be due, and to assent to or take any assignment or assignments, to execute or consent to the execution of any continuations, extensions or renewals of any bond and to execute any substitute or substitutes therefor, with the same or different conditions, provisions and obligees and with the same or larger or smaller penalties. It is expressly understood and agreed that the INDEMNITORS shall remain bound under the terms of this Agreement even though any such assent by the SURETY does or might substantially increase the liability of said INDEMNITORS.

ADVANCES

TWELFTH: The SURETY, at its sole option, is authorized and empowered to guarantee loans, to advance or lend to, or for the account of, the CONTRACTOR any money, which the SURETY in its sole discretion may see fit to do, reserving to itself, however, the absolute right to cancel any such guarantee and to cease advancing or lending money to the CONTRACTOR or for the account of the CONTRACTOR with or without cause and with or without notice to the CONTRACTOR. All money expended by the SURETY, or lent or advanced from time to, or for the account of, the CONTRACTOR or guaranteed by the SURETY, and all related costs and expenses incurred by the SURETY, shall be loss to the SURETY for which the CONTRACTOR and the INDEMNITORS shall be responsible, notwithstanding that said money or any part thereof should not be so used by the CONTRACTOR.

BOOKS AND RECORDS

THIRTEENTH: At any time, and until such time as the liability of the SURETY under all bonds is terminated or SURETY is fully reimbursed all amounts due to it under the Agreement, the SURETY shall have the right of access to the books, records, accounts, and documents of the CONTRACTOR and INDEMNITORS, wherever located, for the purpose of inspection, copying or reproduction. Any financial institution, depository, materialman, supply house, or other person, firm, or corporation, when requested by the SURETY, is hereby authorized to furnish the SURETY any information requested, including, but not limited to, the status of the work under any CONTRACT.

being performed by the CONTRACTOR, the condition of the performance of any CONTRACT and payments of accounts. Upon the occurrence of an EVENT OF DEFAULT, CONTRACTOR and INDEMNITORS, upon SURETY'S request, shall immediately turn over to SURETY, or its designee, at a place and in a manner designated by SURETY such books, records, accounts, documents and CONTRACTS in whatever form, as requested by SURETY.

DECLINE EXECUTION

FOURTEENTH: CONTRACTOR and INDEMNITORS are not obligated to request the SURETY to execute, provide or procure any bond required of them in the performance and fulfillment of obligations; furthermore the SURETY has the right to decline to execute, provide or procure any bond requested by CONTRACTOR. If SURETY does execute, provide or procure the execution of a bid bond or proposal bond, or agrees or consents to provide such CONTRACT of suretyship, SURETY retains the right to decline to execute the final bond (including, but not limited to, performance, payment or maintenance bond(s)) that may be required in connection with any award that may be made under the bid proposal or tender to which the bid proposal bond or agreement or consent to provide such CONTRACT of suretyship is given.

WAIVER OF NOTICE

FIFTEENTH: The INDEMNITORS hereby waive notice of the execution of any bond and of the acceptance of this agreement. CONTRACTOR and INDEMNITORS hereby waive all notice of any default, payment or any other act or acts giving rise to any claim under any bond, as well as notice of any and all liability of the SURETY under any bond, and any and all liability on their part hereunder, to the end and effect that, the CONTRACTOR and the INDEMNITORS shall be and continue liable hereunder.

SUITS

SIXTEENTH: Separate suits may be brought by SURETY to enforce the terms of this agreement as causes of action accrue, and the bringing of suit or the recovery of judgment upon any cause of action shall not prejudice or bar the bringing of other suits upon other causes of action, whether previously or subsequently arising.

The CONTRACTOR and each INDEMNITOR is the agent for the CONTRACTOR and all INDEMNITORS for the purpose of accepting service of any process in the jurisdiction on which the CONTRACTOR or INDEMNITORS accepting the process resides, is domiciled, is doing business or is found.

In the event SURETY shall file suit at law or in equity to enforce the terms of this agreement, SURETY shall be entitled to recover its own attorneys' fees and expenses in connection with such suit.

SET OFF

SEVENTEENTH: SURETY may reduce the amount of CONTRACTOR'S and INDEMNITOR'S(S') liability to SURETY hereunder by applying to such liability any money payable to CONTRACTOR and/or INDEMNITORS by SURETY. The money payable to CONTRACTOR or INDEMNITORS may be, but is not limited to, any money payable by SURETY as an insurer of CONTRACTOR or INDEMNITORS or as an insurer of any other individual or legal entity, or any money payable to CONTRACTOR or INDEMNITORS as a return of unearned or other premiums, or money payable to settle a claim of CONTRACTOR or INDEMNITORS against SURETY or any individual or other legal entity insured or bonded by SURETY.

OTHER SURETIES

EIGHTEENTH: If the SURETY procures the execution of any bond by other sureties, or executes the bonds with co-sureties or reinsures any portion of said bonds with reinsuring sureties, then all the terms and conditions of this agreement shall inure to the benefit of such other sureties, co-sureties and reinsuring sureties, as their interests may appear.

TERMINATION

NINETEENTH: If CONTRACTOR or INDEMNITORS previously executed an agreement in favor of SURETY, SURETY'S accepting this agreement neither terminates such previous agreement nor relieves CONTRACTOR or INDEMNITORS from liability to SURETY.

This agreement may be terminated as to CONTRACTOR or any INDEMNITORS upon written notice to SURETY by CONTRACTOR or INDEMNITORS, or by CONTRACTOR'S or INDEMNITOR'S legal representatives or successors, by registered or certified mail addressed to SURETY at its home office at The Bond Department, 55 West Street, Keene, New Hampshire 03431.

Termination of this agreement shall not be effective until thirty (30) days after receipt of said written notice by SURETY.

Termination of this agreement shall not relieve the CONTRACTOR or INDEMNITORS from liability to SURETY arising out of bonds executed, provided or procured by SURETY on behalf of CONTRACTOR prior to the effective date of such termination and for which this agreement is part of the consideration on which SURETY relied in executing, providing or procuring such bonds.

It is understood and agreed that oral notice to or constructive notice to any agent or employee of SURETY shall not constitute effective notice of termination under this agreement.

NOTIFICATION TO INDEMNITORS

TWENTIETH: The INDEMNITORS agree among themselves and hereby acknowledge to SURETY that notification by SURETY to any one INDEMNITOR shall constitute notification to all INDEMNITORS.

SUBORDINATION OF INDEMNITORS

TWENTY-FIRST: The CONTRACTOR and INDEMNITORS waive and subordinate all rights of indemnity, subrogation and contribution each against the other until all obligations to the SURETY under this agreement, at law or in equity, have been satisfied in full.

HOMESTEAD

TWENTY-SECOND: The CONTRACTOR and the INDEMNITORS hereby waive, to the extent permitted by law, so far as their respective obligations under this agreement are concerned, all rights to claim any of their property including their respective homesteads, as exempt from levy, execution, sale or other legal process under the laws of any State, Territory or Possession.

POWER OF ATTORNEY

TWENTY-THIRD: The CONTRACTOR and INDEMNITORS hereby irrevocably nominate, constitute, appoint and designate the SURETY, through its authorized representative(s), as their attorney-in-fact with the right but not the obligation, to exercise all of the rights of the CONTRACTOR and INDEMNITORS assigned, transferred and set over to SURETY in this agreement, and in the name of the CONTRACTOR and INDEMNITORS to make, execute, and deliver any and all additional or other assignments, documents, or papers, checks, drafts, warrants or other instruments made or issued in payment of any obligation to which SURETY has the right to receipt of payment pursuant to this agreement deemed necessary and proper by the SURETY in order to give full effect not only to the intent and meaning of the within assignments, but also to the full protection intended to be herein given to the SURETY under all other provisions of this Agreement. The CONTRACTORS and INDEMNITORS hereby ratify and confirm all acts and actions taken and done by SURETY as such attorney-in-fact.

SEVERABILITY AND PARTIAL EXECUTION

TWENTY-FOURTH: If any provision or provisions, or portion thereof, of this agreement shall be void or unenforceable under the laws of any jurisdiction governing its construction, this agreement shall not be void or vitiated thereby, but shall be construed and enforced within the same effect as though such provision or provisions, or portion thereof, were omitted.

In case any of the parties mentioned in this agreement fail to execute the same, or in case the execution hereof by any of the parties shall be defective or invalid for any reason, such failure, defect or invalidity shall not in any manner affect the validity of this agreement or the liability hereunder of any of the parties executing the same, but each and every party so executing shall be and remain fully bound and liable hereunder to the same extent as if such failure, defect or invalidity had not existed.

NOTICE TO SURETY

TWENTY-FIFTH: The CONTRACTOR and INDEMNITORS shall promptly provide written notice to the SURETY at the Bond Department, 55 West Street, Keene, New Hampshire 03431, of either of the following events:

- (1) Notice by any obligee on any bond to the CONTRACTOR that the CONTRACTOR is in default or has failed or refused to perform any CONTRACT obligation;
- (2) Notice by any obligee on any bond to the CONTRACTOR that the CONTRACTOR cure its performance or show cause as to why the CONTRACTOR should not be terminated for default.

GENERAL PROVISIONS

TWENTY-SIXTH: SURETY'S rights hereunder shall be deemed to be cumulative with, and in addition to, all other rights of SURETY, however derived. SURETY is not required to exhaust its remedies or rights against CONTRACTOR or to await receipt of any final dividends from the CONTRACTOR before asserting its rights against any one or more INDEMNITORS.

This agreement is to be liberally construed so as to protect, exonerate and indemnify SURETY.

The paragraph titles as contained in this agreement are descriptive only and do not restrict or modify the terms of this agreement. In the event of any inconsistency between the paragraph titles and the terms of this Agreement, the terms of this Agreement shall control.

WAIVER AND MODIFICATION

TWENTY-SEVENTH: The rights and remedies afforded to the SURETY by the terms of this agreement may not be waived or modified orally and no written change or modification shall be effective until signed by an employee of the SURETY.

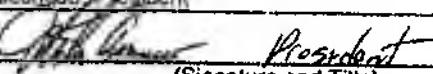
MERGER AND CONSOLIDATION

TWENTY-EIGHTH: THE CONTRACTOR AND INDEMNITORS HAVE READ AND UNDERSTAND THIS AGREEMENT. EXCEPT FOR ANY PREVIOUS INDEMNITY AGREEMENT EXECUTED BY CONTRACTOR OR INDEMNITORS THIS AGREEMENT OF INDEMNITY CONSTITUTES THE ENTIRE AGREEMENT BETWEEN THE PARTIES. NO OTHER SEPARATE AGREEMENTS OR UNDERSTANDING, PAST, PRESENT OR FUTURE WHETHER ORAL OR WRITTEN CHANGE THE TERMS OF THIS AGREEMENT.

Address:
29 Wood Avenue

Contractor: (Full Name of Contractor) Assuncao Brothers, Inc.
Martin Assuncao, President

Edison, New Jersey 08820

By: 
(Signature and Title)

SS # or ID #: [REDACTED]

Address:

Contractor: (Full Name of Contractor)

SS # or ID #: [REDACTED]

Address:
7 Hazlewood Court

Indemnitor: (Full Name of Indemnitor)
Martin Assuncao

Warren, New Jersey 07059

By: 
(Signature of Indemnitor)

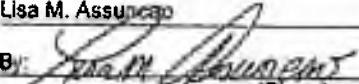
SS #: [REDACTED]

Date of Birth: [REDACTED]

Address:
7 Hazlewood Court

Indemnitor: (Full Name of Indemnitor)
Lisa M. Assuncao

Warren, New Jersey 07059

By: 
(Signature of Indemnitor)

SS #: [REDACTED]

Date of Birth: [REDACTED]

Address:

Indemnitor: (Full Name of Indemnitor)

By:

(Signature of Indemnitor)

SS #: [REDACTED]

Date of Birth: [REDACTED]

Address:

Indemnitor: (Full Name of Indemnitor)

By:

(Signature of Indemnitor)

SS #: [REDACTED]

Date of Birth: [REDACTED]

** Personal, corporate and partnership acknowledgements and additional signature pages if necessary will be added to this Agreement as addendums.

* Attention Notaries * Please type or print your name below your signature and include your address.

INDIVIDUAL NOTARIZATION(S)

State of New Jersey)
County of Middlesex)
ss:

On this 24th day of July, 2012, before me personally came Martin Assuncao to me known, and known to me to be the individual(s) who executed the foregoing instrument, and that (she) (he) (they) executed the same.
Notary's Address:

174 Greenway Dr.
Glenwood Beach, NJ 07733

Notary: Cathy A. Carroll
My Commission Expires:

State of New Jersey)
County of Middlesex)
ss:

CATHY A. CARROLL
Notary Public of New Jersey
Commission Expires 5/19/2016

On this 24th day of July, 2012, before me personally came Lisa M. Assuncao to me known, and known to me to be the individual(s) who executed the foregoing instrument, and that (she) (he) (they) executed the same.

Notary's Address:

174 Greenway Dr.
Glenwood Beach, NJ 07733

Notary: Cathy A. Carroll
My Commission Expires:

CATHY A. CARROLL
Notary Public of New Jersey
Commission Expires 5/20/16

State of _____)
County of _____)
ss:

On this _____ day of _____, before me personally came _____ to me known, and known to me to be one of the firm of _____ and acknowledge that he/she executed the foregoing instrument as the act of the said firm.

Notary's Address:

Notary:
My Commission Expires:

State of _____)
County of _____)
ss:

On this _____ day of _____, before me personally came _____ to me known, and known to me to be one of the firm of _____ and acknowledge that he/she executed the foregoing instrument as the act of the said firm.

Notary's Address:

Notary:
My Commission Expires:

* Attention Notaries * Please type or print your name below your signature and include your address.

CORPORATION NOTARIZATION(S)

State of New Jersey)
County of Warren) ss:

On this 21st day of July, 2012 before me personally came Martin Assuncao to me known, who, being by me duly sworn, did depose and say that he/she resides in 7 Hazlewood Court Warren, NJ 07059 that he/she is the President of the Assuncao Brothers Inc. corporation which executed the foregoing instrument: that he/she knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of the said corporation; and that he/she signed his/her name to the said instrument by like order.

Notary's Address: 179 W. Greenwood St.
11th Floor Bldg 200 07735

Notary: Cathy A. Carroll
My Commission Expires: _____

CATHY A. CARROLL
Notary Public of New Jersey
Commission Expires 5/19/2016

State of _____)
County of _____) ss:

On this _____ day of _____ before me personally came _____ to me known, who, being by me duly sworn, did depose and say that he/she resides in _____ that he/she is the _____ of the _____ corporation which executed the foregoing instrument: that he/she knows the seal of the said corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by order of the Board of Directors of the said corporation; and that he/she signed his/her name to the said instrument by like order.

Notary's Address: _____

Notary: _____
My Commission Expires: _____